



The People Power Capital Campaign will allow us to create a physical space that will drive our advocacy and movement building, support our communities to collaborate in change-making, and serve as a space for sustainability and collective innovation.

Donor Information (please print or type)

Name _____
Billing address _____
City, Street, Zip _____
Phone 1 | Phone 2 _____
Fax | Email _____

Pledge Information

I (we) pledge a total of \$_____ to be paid: now monthly quarterly yearly.

I (we) plan to make this contribution in the form of: cash check credit card other.

Name of Bank: _____

Account number: _____

Routing number: _____

Authorized signature: _____

Gift will be matched by (Company/Family/Foundation) _____

form enclosed form will be forwarded

Pay By Credit Card:

Credit Card Account Number: _____

Card Type: _____ Expiration Date: _____ Zip: _____

Security Code _____ Is the card the same name as on this form? YES or NO

Acknowledgement Information

Please use the following name(s) in all acknowledgements: _____

I (we) wish to have our gift remain anonymous.

Signature(s)

Date

Make Checks payable to: **Miami Workers Center- Center for People Capital Campaign**